



Indiana Prescription Monitoring System

402 W Washington St, Room W072; Indianapolis, IN 46204

Phone: (317) 234-4458 Email: inspect@pla.in.gov Fax: (317) 232-2115

INspect RX Report

Disclaimer: a) **Limited usage of INspect report information.** This report is only intended to provide INspect users with an overview of a patient's prescription activity over a specific period of time. The State of Indiana does not warrant this information to be fully complete or accurate. For more information about the prescriptions attributed to the subject of this report, please contact the dispensing pharmacies listed on the final page of the report. All identified inaccuracies/errors should be reported to inspect@pla.in.gov or to the INspect help desk at 317-234-4458.

(b) **Sources of prescriptive data in report.** The prescriptive records noted in the INspect report should reflect actual patient records available at each of the dispensing pharmacies listed at the bottom of the report. The records in the report cannot be altered or modified by members of the INspect staff without the express written consent of the dispensing pharmacy. INspect users should never take steps to modify the results of an INspect report, even if those results are inaccurate.

(c) **Evaluating search results.** The results of an INspect search reflect a combination of both the INspect software's interpretation of the search criteria entered by the user and the prescription data submitted to INspect by each of the dispensing pharmacies listed at the bottom of the report. Users should always check patient keys listed at the bottom of the report to ensure the report reflects the prescriptive history of the correct patient. And in the case of potential inaccuracies/errors, users should call the appropriate dispensing pharmacy to verify the prescription in question. All pharmacy contact information is listed on the final page of the report.

(d) **Patient prescriptive records currently unavailable.** Prescriptions dispensed on an outpatient basis from doctor's offices and some clinics, as well as from exempt facilities such as prisons, methadone clinics, and the Veteran Administration hospitals, may not be present in the INspect report. Instances in which a dispensing pharmacy fails to report every seven (7) days in accordance with Indiana statute may adversely affect the accuracy and/or timeliness of the information contained in the INspect report.

(e) **Multiple prescriptions attributed to patient on single day.** In some cases, two prescriptions attributed to a patient for a single day may be the result of an unresolved Medicaid and/or health insurance claim at the pharmacy level. Be sure to contact the dispensing pharmacies to validate all prescription information presented in the report.

(f) **Timeliness of the report.** While Indiana law requires that all pharmacies submit data to INspect within seven (7) days from the date on which a drug is dispensed to a patient, there may be a lag of two (2) weeks or more before prescription data is available for review on INspect.

(g) **Usage by certified agents.** Registered INspect users may certify an agent to access INspect on their behalf. The healthcare provider assumes sole responsibility for all activities related to the usage of their individual INspect account.

(h) **Safeguarding patient confidentiality.** All users (healthcare providers, and/or their agents) should run INspect reports only on those patients to whom they are providing treatment or identifying the need for treatment. It is a violation of HIPAA and a patient's right to privacy to discuss the contents of this report with individuals who are not directly involved in providing treatment to the subject of the INspect report.

(i) **Approved manner of sharing and storing report.** While the INspect report should not be considered part of the patient's per se medical record, the information contained in the INspect report is privileged medical treatment information that should not be shared or discussed with anyone not in some way involved in the provision of medical treatment to subject of the report. If the INspect Patient Rx History Report is to be stored alongside other patient medical records, it must be clearly marked "Do Not Copy," and it should never be included when sending a patient medical records to another health provider, as the contents of the report are subject to change. Users are permitted to contact other health providers to discuss the contents of an INspect report as it relates to the care of a mutual patient. If another health provider wishes to obtain their own hard copy of a patient's INspect report, they should be advised to establish their own user account with INspect and submit a separate request for the report. The report, or the contents of the report, should not be faxed, mailed, emailed or otherwise disseminated.

(j) **Patient access to report and procedures for resolving errant data.** The INspect report provides a comprehensive listing of outpatient dispensed controlled substance prescriptions attributed to a single patient over a specific date range. The information contained in each INspect report should, by law, mirror the records stored on-site at each dispensing pharmacy. Patients are eligible to obtain all of their records stored on-site at dispensing pharmacies; however, patients are not eligible users of INspect services, and they should not be provided copies of the INspect report. In the event of an error or reporting discrepancy, the INspect program will correct the record if and only if the dispensing pharmacy formally acknowledges the existence of such a problem. Health providers are encouraged to work on the patient's behalf to resolve problems at the pharmacy level. On a case by case basis, INspect will provide concerned patients with a listing of all dispensing pharmacies corresponding to each prescription record attributed to the patient over a specified period of time. The dispensing pharmacy listing provided by INspect should be sufficient to allow the patient to remedy any errant records on file at the dispensing pharmacy. After appropriate changes are made to records at the pharmacy level, and after the pharmacy duly notifies INspect of these changes, the INspect program staff will take immediate steps to update INspect records



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dummy,patient

Date: 12-09-2010

Search Criteria: Last Name: dummy First Name: patient Date Of Birth: 1/1/2000 Gender: 6

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Patients that match search criteria

Pt ID	Name	DOB	Address
1904	PATIENT DUMMY	01/01/2000	3109 W. SYCAMORE KOKOMO IN 46901
1882	PATIENT DUMMY	01/01/2000	3109 W Sycamore St Kokomo IN 469014181
9945	PATIENT DUMMY	01/01/1950	123 HAPPY STREET SC 29306
7088	PATIENT DUMMY	06/28/1900	4681 W COWDEN RD IN 47429
4601	PATIENT DUMMY	04/18/1958	2530 N WEBSTER ST IN 46901
4604	PATIENT DUMMY	04/15/1945	250 MC DOWELL LN IN 47462
4605	PATIENT DUMMY	06/28/1953	4681 W COWDEN RD IN 47429

Prescriptions

Fill Date	Product, Str, Form	Qty	Days	Pt ID	Prescriber	Written	Rx #	N/R	Pharm	Pay
11/15/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;5 MG, TABLET	60	8	9945	BR D	11/12/2010	4006062	N	1520318	U
10/12/2010	EMBEDA CAPSULES EXTENDED RELEASE, 30 MG;1.2 MG, CAPSULE, EXTENDED RELEASE	84	28	1882	KL J	10/12/2010	2013618	N	1517979	U
08/10/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;7.5 MG, TABLET	30	5	1904	DI M	08/10/2010	4059071	N	1517979	U
07/22/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;10 MG, TABLET	20	4	1904	RI K	07/22/2010	4017439	N	1536373	U
07/22/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;10 MG, TABLET	20	4	1904	RI K	07/22/2010	4017439	R	1536373	U
07/22/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;10 MG, TABLET	60	10	1904	RI K	07/22/2010	4017439	R	1536373	U
07/22/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 650 MG;10 MG, TABLET	150	30	1904	RA B	07/22/2010	4017445	N	1536373	U
07/17/2010	TUSSIONEX SUSPENSION EXTENDED RELEASE, NS;NS, SUSPENSION, EXTENDED RELEASE	120	10	9945	TH F	07/17/2010	4004975	N	1532161	U

DISCLAIMER: The State of Indiana does not warrant the above information to be complete or accurate. This report, and the information contained in this report, must be used in accordance with IC 35-48-7, the INspect Health Practitioner Usage guidelines and all federal laws pertaining to confidential patient health information. To ensure protection of patient privacy, this report must never be mailed, emailed, faxed or otherwise distributed. If this report is printed or stored on-site, it must be marked "Do Not Copy." Misuse of INspect data is a criminal offense and could result in action adverse to an accountholder's professional license.